

CLASS C REINSTATEMENT FORM

224944

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| File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199 | Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815 |
|---|--|

DATE: 7/22/10

Please consider this an application for Reinstatement of my:

- ☐ Taxi Certificate Number _____
☒ Charter Certificate Number 8008
☐ Charter Bus Certificate Number _____
☐ Non-Emergency Certificate Number _____

RECEIVED
 JUL 22 2010
 PSC SC
 CLERK'S OFFICE

My certificate was revoked/cancelled on 2/24/10 because NON USE. NO vehicles
 (DATE)
listed under the Certificate

I am seeking reinstatement because now have vehicles to use for chartered
services.

Diamond Transport Inc DBA TMD Transport Inc.
 (Name of Company) (if applicable)

2601 Road St. Ste I-4 PO Box 161250 Boiling Springs, SC 29316
 (Street Address) (Mailing Address if different from Street Address)

Columbia, SC 29204 [Signature]
 (City, State, Zip Code) (Signature)

864 612 8844 VICE PRESIDENT
 (Telephone Number) (Title) Owner, President, etc.

ORS Revised 2-22-10

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

RECEIVED

JUL 22 2010

JUL 22 2010

PSC SC
CLERK'S OFFICE

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2008-167-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Diamond Transport dba TMD Transport Telephone: 864 612 8844
July 2, 2010 Other: _____

NATURE OF ACTION (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Order of Authority |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit |
| <input type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Response |
| <input checked="" type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Name Change on Certificate | <input type="checkbox"/> Other: _____ |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

